

FLORIDA AIDS DRUG ASSISTANCE PROGRAM

April 21, 2016 Statewide Conference Call Minutes

10:00 AM – 11:00 AM

Counties Represented: Alachua, Bay, Bradford, Brevard, Charlotte, Collier, Desoto, Duval, Escambia, Flagler, Gadsden, Hendry / Glades, Hernando, Highlands, Hillsborough, Jackson, Lake, Lee, Leon, Manatee, Marion, Miami-Dade, Monroe, Okaloosa, Orange, Osceola, Palm Beach, Pasco, Pinellas, Polk, Putnam, Santa Rosa, Sarasota, St. Lucie, Taylor, Union, Volusia, Wakulla.

ADAP Headquarters Participants: Steven Badura, James Easton, Cherrishe Brown, Tammy Cuyler, Paul MeKeel, Jimmy Llaque

ADAP REORGANIZATION

ADAP central office is in the middle of its reorganization, which will create two subgroups within ADAP: Benefits Coordination and Operations and Compliance. As we move closer to completing this reorg, we will share more information, but until then, you will still contact your area consultants when you need assistance. Please review the revised map that was sent out on 4/20/16.

The area consultant map will follow the same state area divisions used for HAPCs and Community Programs. ADAP staff, **PLEASE REVIEW THE REVISED MAP** and contact your new central office consultant for your area, if there has been a change.

ADAP is pleased to welcome Tammy Cuyler as part of our team.

ADAP DATABASE UPDATE

GROUPWARE & PE SYSTEM - the development of the new software for the ADAP database is currently underway and will be completed at the end of this year.

LAB REPORTS

The requirement for capturing the CD4 lab values twice a year is still in HRSA guidelines, so the ADAP program is required to capture this. A change in the rule will be coming up and be implemented as needed once approved. If lab work has been done and you are waiting, you may use the older values and then update when those are available.

ADAP POLICY MANUAL

Final update is being completed and will be posted on the floridahealth.gov website. Notice of posting will be sent out to the counties.

TRAININGS

ADAP PROGRAMMATTIC trainings are scheduled for May 24 & 25, July 26 & 27 and September 27 & 28. Link to register will be sent out in advance. Additional trainings will be launched later in 2016 and will include some face to face regional trainings including training for the new ADAP software system.

■ NEW DRUGS

Odefsey and Descovy are in the process of being added to the ADAP formulary. The process for the approval is underway and as soon as those are added, a notice will be sent out alerting you when they are available. These drugs will also be added at CVS pharmacies as well.

■ HEP C PILOT PROJECT

- Pilot program has been extended to include entire state and will be overseen by the HAPC in your area.
- Treatment for 100 to 125 patients is now available.
- Pre-approval is required.
- Hep C drugs have not been added to the ADAP FORMULARY on the prescription page or general formulary list, requiring the pre-approval to be added to a client's file.

■ MEDICATION RETURNS TO CENTRAL PHARMACY

Medications can be returned through PFS up to 60 days. After 60 days counties will need to manually fill out forms to return medications. It is suggested to return meds after 30 days after trying to contact a client who has not picked up. See the ADAP policy manual for information regarding clients not picking up and not taking medications. Need to determine restarting meds and doctor's approval.

■ 30-DAY CLOSURE REPORT

Any county that has not been receiving the 30-day closure report on Monday mornings, please send an email to steven.badura@flhealth.gov. The email for your county may be incorrect as showing in the system that triggers the report. The auto closure report is also available in the ADAP database.

Paul will send out an excel formulary which will assist in determining client closures.

■ PICK UP PERCENTAGE REPORT FOR COUNTIES

Concerns as to the accuracy of the Pick-up Percentage Report have been addressed, with the formula for calculation being confirmed and accurate.

Training is being developed to fine-tune your percentages to monitor and determine that reports are correct. Webinar training will be next month and Cherrishe will send out a notice to let you know the time and date.

■ CVS CARDS

We are aware that multiple cards have been sent out to counties for clients and have made CVS corporate aware of this.

■ **INSURANCE / RETURNED CHECKS**

In the event that an insurance carrier has returned a premium payment check or a reimbursement to a client, those checks must be returned to BROWARD REGIONAL HEALTH PLANNING COUNCIL (third party payer) who originally submitted the premium payment.

Client will need to sign the back of the check for BRHPC to cash. Clients who receive a check made out to them should not cash it; but if they have cashed it they will need to reimburse the program.

Checks can be sent to:

BROWARD REGIONAL HEALTH PLANNING COUNCIL

attn.: Emily Tolle, 200 Oakwood Lane, Suite 100, Hollywood, FL 33020

PLEASE NOTE: if a client has cashed a check but does not have the funds to repay, a repayment plan can be created. It will depend on each county jurisdiction to determine what that looks like. HRSA has stated that ADAP is to vigorously pursue any repayments. Work with your CHD attorney office to address as needed and contact the client.

See the client summary of notification they signed that state refunds are to be returned to ADAP. ADAP will still serve these clients who may need to repay.

■ **ACA INSURANCE UPDATE**

Florida Blue required Prior Authorization (PA) for members newly prescribed ARV medications. Prescribing clinicians easily met this requirement for ADAP clients at the initiation of an ARV regimen. Earlier this year, Florida Blue expanded this requirement to include all members taking ARVs. A prescribing clinician's office will usually be able to initiate the PA process through a phone call. However, due to reports of clients having to make an appointment and go to a doctor visit to accomplish this, Joseph Cohen in the ADAP central office has completed a blanket override for all clients affected. If a client presents with this issue, please contact Joseph to resolve the issue. It is unknown at this time whether Florida Blue will require a new PA for 2017, but it seems likely that they will.

■ **INSURANCE REINSTATEMENTS**

ADAP central office is working to reinstate UHC and Molina plans that were terminated due to non-payment. There has been success for the most part and the program is still working on this. If problems persist please let us know. You should be able to access the PDA if a plan has not been reinstated.

Late payment status – we are in the process of creating a list of those reinstated, but you may call the 800 number of the insurance carrier to find out a client's status. If a balance due, then it is active – contact your consultant to have payment made.

UHC has a process for a client to request to pick up from a retail pharmacy. This is based on legal action and requires the client to state one of the following reasons:

- The client is concerned about his/her privacy in connection with receiving medication packages where he/she lives or works. (Disclosure of HIV status)
- The client is concerned about the timing, accuracy or other problems with the delivery of his/her medications from OptumRx. (Mail order risks)
- The client is unable to effectively discuss his/her condition over the phone with OptumRx due to an HIV-related neurocognitive disorder or other significant HIV-related impairment that is being monitored or treated.

The client may fax the form to request to pick up at CVS or they may make the above declaration by phone. The client must renew this exemption every year.

UNITED HEALTHCARE OPT OUT

The client should be able to call 1-866-803-8570 with their membership number and the name and address of the CVS where they want to pick up.

The other option is to submit the form at

<http://www.unitedhivsettlement.com/Documents/UHD0001/UHD%20-%20Opt%20Out%20Form.pdf> by mail or fax as indicated on the form.